#### Dyskinesia

There were 21 modafanil treated subjects who experienced 26 adverse events codiing to dyskinesia. The mean AE onset day was day 100 for the CS phase 3 group, with the onset day not known for the FNC studies. Fourteen of the events were considered to be related to study medication. No change in study medication was made for 15 events. Five subjects previously described discontinued study medication. The dyskinesia resolved without residual in 18 events and in 8 events was ongoing at the time of discontinuation.

## Sponsor's Conclusion (dyskinesia)

The sponsor concludes that there does not appear to be an increased risk of developing "tardive dyskinesia" on modafanil. Thirteen of the the dyskinesia AEs in the CS phase 3 studies stopped while the patient was on modafanil or within two weeks of stopping medication. Two subjects are currently still on modafanil despite a dyskinetic AE. Both these AE's are intermittent.

#### Conclusion 10.0

From the available information provided by the sponsor it appears that modafanil treated patients experiencing dyskinesia is related to modafanil. This conclusion is based on the following evidence. There were no reports of dyskinsia adverse events among placebo treated patients. There appears to be a case of dyskinesia with re-challenge (72 year-old man, subject 876/F-04). Two patients experienced dyskinesia within a relatively short time while receiving high doses of modafanil (15 year old girl, subject Open/9-2/K11E; 35 year-old man, subject 102/24) The dyskinesia resolved within a short time of

discontinuing modafanil in these two patients. Two patients remain on modafanil with intermitent dyskinesia, which presumably was not present prior to treatment.

The information available on these cases reviewed by the sponsor is incomplete, especially with respect to factors such as coexisting illnesses, concomitant medications, and outcome, especially in patients from the FNC studies. The sponsor states that thirteen of the dyskinesia adverse events stopped while the subject was on modafanil or within two weeks of stopping medication, however the number in each group is not provided.

As noted by the sponsor, several newly reported adverse experiences and discontinuations indicate the potential for hypersensitivity to modafanil.

As recognized in the initial NDA review of studies 301 and 302, elevations in GGT and alkaline phosphatase continue to show mild elevations over time from baseline in a dose dependent manner. Several cases of clinically significant elevations of GGT were identified. For the most part these patients had elevated GGT at baseline. In most cases there was no associated elevation of AST or ALT. None of the cases were associated with clinically significant elevations of total bilirubin. The clinical significance of these GGT elevations is uncertain.

Several additional cases of tachycardia and hypertension were reported in the update. In addition the pulse and blood pressure measurements from studies 201, and 112 indicate

clinically insignificant increase in pulse and blood pressure following modafanil administration.

Overall, based upon the Integrated Summary of Safety Update, modafanil continues to have a benign safety profile.

Joel Freiman, M.D. Medical Reviewer

R. Katz

HFD-120

NDA, 20-217

HFD-120, Freiman, Katz, Hommany

Table 9. Summary of Open-Label Serious Adverse Experiences (C1538a/301/NA/US and C1538a/302/NA/US)

Patient	<del></del>		The state of the s	Onset		Relationship to
Number	Age	Sex	Adverse Experience	(Study Day)	Severity	Study Drug
Modafinil				(Otacy Day)	Deventy	Olddy Diag
1104	54	М	Pneumonia	306	Severe	Remote
1211	60	М	Joint disorder	559	Moderate	None
1419	63	M	Benign tumor in colon	871	Severe	None
			and rectum	0	COTOIC	HONG
1423	69	F	Pneumonia	831	Causes	Nana
1720	03		Lung cancer	889	Severe	None
14 a d a 8 a 2	400	101	<del>-</del>	009	Life-threatening	None
Modafinil 0302		-	•			
0302	46	М	Numbness in bilateral	895	Moderate	None
	i		upper and right lower			
		_	extremities			
0606	37	F	Skin carcinoma*	-20	Mild	None
0913 <sup>b</sup>	20	F	Accidental overdose	169	NR	NR
1306	50	F	Endometrial carcinoma	284	Severe	Remote
1711	51	М	Cerebrovascular	118	Severe	Remote
1804	25	F	accident*	400		
1004	35	r	Carcinoma*	160	Life	None
			Don't a subsection		Threatening	
Modefinil	200	ICA	Brain edema	195	Severe	None
Modafinil 0109	300 п 27		Banahaman	700		
0109	54	M M	Bronchopneumonia <sup>c,d</sup>	722	Moderate	None
0307	54 51	F	Kidney calculus* Wheezing <sup>c,d</sup>	148	Mild	None
0307	31	F	Palpitations <sup>c,d</sup>	638 680	Moderate	Possible
			Congestive Heart	689	Severe	Possible
			Failure <sup>c,d</sup>	009	Severe	Possible
			Cardiomegaly <sup>c,d</sup>	689	Severe	Possible
0606	28	F	Neoplasia UG*	20	Severe	None
		•	(urogenital)	20	OCTOIC	None
0701	25	М	Intentional injury*	135	Life	None
				.00	Threatening	110110
0706	48	F	Chest Pain*	125	Severe	Remote
0707	18	M	Gunshot Wound <sup>c,d</sup>	741	Mild	None
1307	56		Retinal hemorrhage*	193	Moderate	Remote
			Carcinoma*	232	Moderate	Remote
1417	38	M	Agitation*	135	Moderate	None
1507	33		Adjustment	818	Severe	None
			disorder/relational problems <sup>c,d</sup>			
1509	49	F	Chest pain*	118	Moderate	Remote
1721	50		Hematoma*	2	Moderate	None
			Bronchitis:	484	Moderate	None
1905	50		Chest tightness <sup>cd</sup>	765	Moderate	None
			Coronary Artery	787	Moderate	None
			Disease <sup>c,d</sup>			
2102	22	M	Attempted suicide <sup>c,d</sup>	647	Severe	None
2113	52		Chest pain*	150	Moderate	None
2120	51		Palpitations*	20	Severe	Remote

Table 9. Summary of Open-Label Serious Adverse Experiences (C1538a/301/NA/US and C1538a/302/NA/US) (continued)

Patient				Onset	<del></del>	Relationship to
Number			Adverse Experience *	(Study Day)	Severity	Study Drug
Modafinil	300 n	ng/St	udy 301 (continued)			
2216	60	M		806	Severe	None
l			atherosclerosis <sup>c,d</sup>			
1	, '		Quadruple bypass	813	Severe	None
	į		surgery <sup>c,d</sup>			
Modafinil	300 n	ng/St	udy 302			
0106	45	F	Hysterectomy surgery*	105	Severe	None
0212	20	F	Pyelonephritis*	23	Severe	Possible
0306	54	М	, ,	-32	Severe	None
0405	26	М	Neoplasia*	-38	Moderate	None
H			Rhinitis*	-38	Moderate	None
0504	42	М	Exertional dyspnea <sup>cd</sup>	787	Moderate	None
-			Third Degree Atrio-	836	Severe	None
			Ventricular Heart Block <sup>c,d</sup>			
0908	47	М	Chest pain*	65	Severe	None
0909	26	М	Toxic encephalopathy <sup>c,d</sup>	762	Moderate	Remote
1002	60	М	Lower back muscle	635	Severe	None
			spasms <sup>c,d</sup>			
1206	52	М	Chest pain	381	Moderate	None
H			Chest pain	381	Moderate	None
ı			Angina pectoris	571	Severe	None
1			Speech disorder	585	Severe	None
li .			Abnormal vision	585	Severe	None
1505	60	F	Infection*	171	Severe	None
l .			Myocardial infarction <sup>c,d</sup>	739	Mild	None
i			Congestive heart failure <sup>c,d</sup>	791	Severe	None
1519	53	F	Lung disorder	125	Severe	None
1704°	53 45	F	Accidental overdose*	220	Moderate	None
				540	Life	Possible
1904	37	М	Accidental injury	540	Threatening	Pussible
2012	63	М	Lung disorder*	106	Severe	None
2012	64	M	Pneumonia*	176	Moderate	None
1	-			170	Housials	HVIIC
Modafinil 0410	200 1	ng/ s F	Leukopenia*	-87	Mild	Possible
0505	52	F	Thyroid goiter	829	Moderate	Possible
U3U3	52	Г	Leukopenia*	-87	Mild	Possible
			-	-07	17.110	TOURIU
1210	31	F	(neutropenia) Pruritus	564	Mild	Possibly
1210	31		Fruntus	304	WING	i Jaaibiy

J.

Table 9. Summary of Open-Label Serious Adverse Experiences (C1538a/301/NA/US and C1538a/302/NA/US) (continued)

				200		
Patient				Onset		Relationship to
Number	Age	Sex	Adverse Experience *	(Study Day)	Severity	Study Drug
Modafinil	200 n	ng/St	udy 301 (continued)			
1423	67	F	Accidental Injury*	39	Moderate	None
			Cardiovascular	355	Life	None
			disorder ' 7		Threatening	
			Cardiovascular disorder	392	Moderate	None
			Lung edema	392	Life	None
					Threatening	
	į		Coronary artery	393	Life	None
	ì		disorder		Threatening	
			Cardiovascular	393	Life	None
			disorder		Threatening	
1911	32	М	Headache	-1	Moderate	None
Modafinil	200 n	ng/St	udy 302			
0601	35	M	Broken pelvis <sup>c,d</sup>	425	Moderate	None
1506	53	M	Dyspepsia*	5	Moderate	Possible
1516	53	F	Accidental Injury	-6	Severe	None

- a: COSTART coding symbol.
  b: Accidental overdose by patient's 2-year-old daughter. Information gathered from MedWatch.
- c: Occurred after database cutoff.
- d: Adverse Experience Term from Case Report Form.
- e: Accidental overdose by patient's 3-year old son.

#### Notes:

Patients 0211 from Study 301 and Patients 1906 and 1412 from Study 302 appear in error in Listing 3.0.1 as having serious adverse experiences. These patients are excluded from the above table.

NR = Not reported.

Source: Appendix 1.0, Listing 3.0.1.

No new pattern or trend is apparent in this list of serious adverse experiences.

## 3.3.5 Clinical Laboratory Tests (C1538a/301/NA/US and C1538a/302/NA/US)

All values for laboratory tests collected at Baseline, at each of the study visits, and at Endpoint (defined as the last visit for all patients), as well as supplemental assessments and clinical laboratory normal ranges, are presented in Appendices 1.1 to 3.0. Cutpoints for clinically significant laboratory values are found in Appendix 10.0.

<sup>\*</sup>Previously reported serious adverse experiences are marked with an asterisk; new adverse experiences are indicated by bolded text.

## 3.2 Patient Population - Open-Label C1538a/301/NA/US and C1538a/302/NA/US

## 3.2.1 Patient Disposition (C1538a/301/NA/US and C1538a/302/NA/US)

A total of 478 patients entered the 40-week open-label study. Of these patients, 302 (63%) have completed the 40-week, 48-week, or are ongoing in further open-label extension. Overall, 13% of patients discontinued due to lack of study medication efficacy. Most of these were from the highest average dose group, as would be expected if patients moved to a higher dose in an attempt to reach therapeutic levels before discontinuing. Only 10% of patients discontinued due to adverse experiences. Most of these discontinuations were from the lowest dose group, which is also expected for patients sensitive to modafinil that would not want to risk increased severity or frequency of AEs by moving to a higher dose, or who might reduce their modafinil dose for safety reasons. The 40-week study has been completed, the 48-week study is ongoing, and further open-label extension phases are ongoing. Patient disposition is shown in the following table.

Table 1. Open-Label Disposition of Patients\* (C1538a/301/NA/US and C1538a/302/NA/US)

	Ave	rage Daily D	ose	
	Modafinil 400 mg <sup>a</sup> N (%)	Modafinil 300 mg <sup>b</sup> N (%)	Modafinil 200 mg <sup>c</sup> N (%)	Modafinil Combined N (%)
Patients started in open-label treatment Discontinuations from open-label:	112	277	89	478
Lack of study medication efficacy	42 (38%)	18 (7%)	4 (5%)	64 (13%)
Adverse experience	10 ( 9%)	18 (6%)	22 (25%)	50 (10%)
Patient noncompliance	6 (5%)	8 (3%)	6 (7%)	20 (4%)
Patient withdrew consent	10 (9%)	3 (1%)	8 (9%)	21 (4%)
Lost to follow-up	5 (5%)	2 (1%)	5 (6%)	12 (3%)
Protocol violation	1 (1%)	0	0	1 (<1%)
Other	2 (2%)	4 (1%)	2 (2%)	8 (2%)
Completed 40-week or 48-week open-label	36 (32%)	224 (81%)	42 (47%)	302 (63%)
treatment phases, or continuing in open-label				

<sup>\*</sup>From database up to 6/2/97 cut-off date.

## 3.2.2 Overall Exposure to Treatment (C1538a/301/NA/US and C1538a/302/NA/US)

A total of 478 patients were exposed to modafinil treatment for the first 8 weeks of open-label study; 209 patients had reached open-label extension week 48 by the data cut-off date. Overall treatment exposure by average daily dosage is presented in the table below.

a: 400 mg: aversge daily dose ≥350 mg

b: 300 mg: aversge daily dose ≥250 mg and <350

c: 200 mg: aversge daily dose <250

Table 2. Open-Label Patient Exposure to Treatment (C1538a/301/NA/US and C1538a/302/NA/US)

		Average	Daily Dose	
Duration of Exposure	Modafinil 400 mg n (%)	Modafinil 300 mg n (%)	Modafinil 200 mg n (%)	Modafinil Combined n (%)
OL Week 1-8	112 (100%)	277 (100%)	89 (100%)	478 (100%)
OL Week 9-16	103 (92%)	252 (91%)	64 (72%)	419 (88%)
OL Week 17-24	85 (76%)	243 (88%)	59 (66%)	387 (81%)
OL Week 25-32	68 (61%)	242 (87%)	57 (64%)	367 (77%)
OL Week 33-40	57 (51%)	241 (87%)	56 (63%)	354 (74%)
OLE Week 1-8	48 (43%)	238 (86%)	52 (58%)	338 (71%)
OLE Week 9-16	31 (28%)	239 (86%)	45 (51%)	315 (66%)
OLE Week 17-24	27 (24%)	234 (85%)	42 (47%)	303 (63%)
OLE Week 25-32	24 (21%)	226 (82%)	42 (47%)	292 (61%)
OLE Week 33-40	19 (17%)	210 (76%)	37 (42%)	266 (56%)
OLE Week 41-48	16 (14%)	160 (58%)	33 (37%)	209 (44%)

OL = Open-label (40 weeks)

OLE = Open-label extension (48 weeks)

Source: Table 2.0.0

In the 478 patients studied, there was a mean (SD) modafinil exposure of 416 (229) days, with an average dose of 305 mg/d. A summary of study medication exposure and actual average dose by mean dosage group is presented in the table below.

Table 8. Summary of Open-Label Adverse Experiences Leading to Discontinuation (C1538a/301/NA/US and C1538a/302/NA/US)

6		unua	HIOH	(C1538a/301/N	4-70-717-7	ELECT TOWNS THE PROPERTY OF PARTY OF THE		
	Patient	_	_	Adverse	Onset		Relationship to	Drug Stop
1	Number	Age		Experience*	(Study Day)	Severity	Study Drug	Day
	Modafinil 4			dy 301	4			
	0502*	53	F	Atrial arrhythmia	116	Moderate	Possible	244
			_	ECG abnormality	129	Moderate	Possible	
	1201	63	F	Anemia	296	Moderate	Remote	313
	Modafinil 4							
90	0223	<b>2</b> 5	F	Unintended	696	Mild	None	723
				pregnancy			- ".	400
	0304*	54	M	Emotional liability	55	Mild	Possible	108
				Depression	56	Mild	Possible	_
	0307*	52	F	Ventricular	1	Moderate	Remote	8
			ļ	extrasystoles				
ł	0402*	27	¹ F	Unintended	223	Mild	None	222
				pregnancy				
i	0708*	28	M	Infection	54	Moderate	None	90
	1212*	64	M	Nervousness	11	Moderate	Possible	56
						_	5	055
•	1306	50	F	Endometrial	284	Severe	Remote	255
1				carcinomab		_	<b>n</b>	446
	1711*	51	М	Cerebrovascular	118	Severe	Remote	118
	·			accident <sup>b</sup>				
	1907*	55	М	Decreased Libido	-83	Moderate	Probable	78
				Arthralgia	28	Severe	Possible	7.0
5	2308	32	F	Unintended	742	Mild	None	742
				pregnancy				
	Modafinil		_	•				4.17
	0104*	25	M	Cataplexy	117	Moderate	Possible	117
_		_	_	Somnolence	117	Moderate	Possible	007
•	0108	54	F	Mood change	898	Moderate	Probable	927
_	l			Imitability	898	Moderate	Probable	600
Ø	0307	51	F	Palpitations <sup>b,c,d</sup>	680	Severe	Possible	690 600
				Congestive Heart	689	Severe	Possible	690
				Failure <sup>b,cd</sup>	600	Causass	Dessible	690
			_	Cardiomegaly <sup>b,c,d</sup>	689	Severe	Possible	68
	0606*	28	F	Neoplasia UG <sup>b</sup>	20 425	Severe	None	135
	0701*	25	М	Intentional injury <sup>b</sup>	135	Life	None	133
			_	8.0 1.1-	04	Threatening	None	112
ka .	0801*	47	F	Myalgia	81	Moderate	None	
9 0	1016	23	F	Unintended	687	Moderate	None	681
				pregnancy	44	Cover	Oroboble	22
	1102*	49	М		11	Severe	Probable Brobable	22
	1		_	Apathy	11	Severe	Probable Probable	190
	1113*	36	F	Headache	-77 75	Mild	Probable Probable	190
	1			Pain	-75	Mild		
				Dizziness	-63	Moderate	Probable Probable	
				Metromhagia	-2 4	Moderate		
	I			Nervousness	1	Moderate	Probable	
	1		_	Infection	210	Moderate	None 1	400
	1121*	32	F	Metromhagia	-57	Moderate	Probable Poleted	109 35
_	1301*	52	F	Anxiety	35 500	Mild	Related	
•	1506	60	F	Somnolence	532	Moderate	None Deskable	613 55
	1915*	25	<u> </u>	Asthma	19	Mild	Probable	55

Table 8. Summary of Adverse Experiences Leading to Discontinuation (C1538a/301/NA/US and C1538a/302/NA/US) (continued)

Patient Number	A ===	8	Adverse Europie se a	Onset	Cauarit:	Relationship to	Drug Stop
			Adverse Experience and ideas and ideas and ideas and ideas are also ar	(Study Day)	Severity	Study Drug	Day
Modannii 2115*	300 m	ig/Stt F	Anxiety	87	Moderate	Probable	100
2214*	56	F	Tremor	18	Mild	Probable	20
ZZ 14	30	Г	Cardiovascular	18	Mild	Probable	20
			disorder	10	MIIIG	Probable	
Modafinil	300 m	ra/Stu	ıdv 302			•	
0108*	35	F	Arthritis	10	Mild .	Possible	23
0202	53	M	Increased cataplexy <sup>c,d</sup>	569	Moderate	Possibly	723
0212	20	ίF	Pregnancy <sup>c,d</sup>	745	Moderate	None	757
0215	50	۱F	increased cataplexy <sup>c,d</sup>	490	Moderate	Remote	566
0303*	66	M	Sleep disorder	-95	Moderate	Probable	13
			Cataplexy	-95	Moderate	Related	
1005*	57	М	Diamhea	-39	Moderate	Remote	55
	٠.		Nervousness	8	Mild	Remote	30
			Nervousness	29	Moderate	Remote	
1904	37	М	Accidental Injury <sup>b</sup>	540	Life	Possible	532
.504	0,		Accidental injury	5-10	Threatening	i ossibic	<b>332</b>
2009*	26	F	Unintended	18	Moderate	None	15
		•	pregnancy	.0	moderate	110110	
2201	20	F	Unintended	564	Moderate	None	616
		•	pregnancy	004	Moderate	110110	0.0
Modafinil	200 m	na/Sti					
0111*	47	F	Chest pain	2	Moderate	Possible	4
0116*	22	м	Dizziness	24	Mild	Remote	64
0110		141	Headache	24	Mild	Remote	04
			Nausea	24	Mild	Remote	
0306*	63	F	SGPT increase	170	Moderate	Probable	179
0300	03	•	Liver function	170	Moderate	Probable	175
			abnormality	170	Middelate	FIUDADIC	
			Alkaline	170	Moderate	Probable	
			phosphatase	<b>170</b>	Moderate	riobable	
			increase	**			
0310*	33	F	Nervousness	50	Moderate	Related	50
0702*	43	F	Depression	149	Moderate	None	142
0705*	31	M	Nausea	39	Mild	Probable	69
1103*	20	F	Nervousness	6	Severe	Probable	11
1109*	53	F	Palpitations	2	Severe	Related	6
1103	JJ		Headache	2	Mild	Possible	U
1115*	49	F	Alcohol intolerance	18	Moderate	None	18
1118*	49 23	F		10	Moderate Moderate	Related	17
		•	Anxiety	•			
1202	39	M	Liver function	290	Moderate	Possible	373
			abnormality	200	14-d	Dessible	
			Leukopenia	290	Moderate	Possible	
			(verbatim: neutropenia)		<u> </u>		···

Table 8. Summary of Adverse Experiences Leading to Discontinuation (C1538a/301/NA/US and C1538a/302/NA/US) (continued)

	Patient	<b>A</b>		Adverse	Onset		Relationship to	Drug Stop
1	Number	Age		Experience*	(Study Day)	Severity	Study Drug	Day
-				dy 301 (continued)				
	1206*	20	F	Unintended pregnancy	83	Moderate	Remote	83
•	1210	31	F	Pruritus <sup>b</sup>	564	Mild	Possibly	587
	1404*	54	F	Depression	29	Severe	Probable	35
•	1503	46	F	Goiter	626	Mild	Remote	626
	1901*	44	M	Nervousness	8	Mild	Probable	8
			, 1	Anxiety	8	Mild	Probable	
	Modafinil	200 m	g/Stu	dy 302				
	0213*	39	F	Nausea	1	Moderate	Related	6
	0219*	22	F	Nervousness	-14	Mild	Probable	170
				Nervousness	-1	Moderate	Probable	
	1			Somnolence	-1	Moderate	Probable	
	0502*	29	F	Unintended pregnancy	242	Severe	None	240
	0707*	39	F	Asthenia	7	Severe	Probable	29
				Nervousness	7	Severe	Probable	-
	0805*	29	F	Nausea	17	Moderate	Related	38
	1			Vomiting	17	Mild	Related	_
	0818*	22	М	Hemoptysis	79	Mild	Remote	103
				Melena	99	Mild	Remote	
	1506*	53	М	Dyspepsia <sup>b</sup>	5	Moderate	Possible	6

a: COSTART coding symbol.

Notes:

Source: Appendix 1.0, Listing 3.0.4.

Though fewer than 11% of the total population discontinued from the open-label phase of the study, many of those that did (50%) were for Nervous System experiences. Complete narratives for each of the patients summarized in the table above who discontinued due to adverse experiences are found in Appendix 6.0.

## 3.3.3.1 New Adverse Experiences Resulting in Patient Discontinuation (C1538a/301/NA/US and C1538a/302/NA/US)

Adverse experiences that resulted in patient discontinuation from study that were not previously reported in the double-blind or open-label phases of C1538a/301/NA/US or C1538a/302/NA/US include the following:

b: This adverse experience also was coded as a Serious Adverse Experience

c: These discontinuations occurred after the database cut-off date.

d: Adverse Experience Term from Case Report Form.

<sup>\*</sup>Previously reported open-label patient discontinuations are marked with an asterisk; new patient discontinuations are indicated by bolded text.

Listing 3.0.4 includes all patients who discontinued study medication due to an adverse experience who may or may not have discontinued from the study due to adverse experiences. The above table and narratives found in Appendix 6.0 include only patients who discontinued from open-label studies 301 or 302.

Table 6. Summary of Common<sup>a</sup> Open-Label Emergent Adverse Experiences (C1538a/301/NA/US and C1538a/302/NA/US)

				Averag	ge Daily D	ose			
	Statistic		dafinil	Мо	dafinil	Mod	dafinil	Mod	dafinil
			0 mg		0 mg	200	0 mg	Con	nbined
			= 112)	(n :	= 277)	(n :	= 89)	(n =	= 478)
Number of Patients with at Least	n (%)	107	(96%)	259	(94%)	82	(92%)	448	(94%)
One Open-Label Emergent			•				•		` '
Adverse Experience									
Body as a Whole									
Headache	n (%)	50	(45%)	128	(46%)	41	(46%)	219	(46%)
Infection	n (%)		(18%)		(37%)		(27%)	147	
Pain	n (%)		(12%)		(20%)		(11%)	77	(16%)
Flu Syndrome	n (%)		(9%)		(15%)		(9%)	60	(13%)
Accidental Injury	n (%)		(6%)	41			(9%)	56	
Back Pain	n (%)		(10%)		(11%)		(9%)		(10%)
Allergic Reaction	n (%)	5	(5%)		(9%)		(5%)		(7%)
Chest Pain	n (%)	2	(2%)		(5%)		(11%)		(6%)
Abdominal Pain	n (%)		(4%)		(5%)		(7%)	25	(5%)
Fever	n (%)		(2%)		(5%)		(3%)		
Neck Pain	n (%)	6			(4%)				(4%)
Cardiovascular	11 (70)	O	( 5%)	''	( 470)	3	( 3%)	20	( 4%)
Hypertension	- (9/)	2	( 20/)	40	( 40/)	_	/ <del>7</del> 0/\	40	
Palpitations	n (%)	2	• ,		(4%)		(7%)		(4%)
•	п (%)	1	(1%)	6	( 2%)	6	( 7%)	13	( 3%)
Digestive	- (0/)	40	44.4845		*****				
Dyspepsia	n (%)		(11%)		(16%)		(12%)	67	(14%)
Tooth Disorder	ก (%)		(13%)		(14%)		(11%)		(13%)
Nausea	n (%)		( 6%)		(13%)		(16%)	57	(12%)
Diarrhea	n (%)		( 5%)		( 9%)	6	( 7%)	36	( 8%)
Dry Mouth	n (%)		( 2%)		( 8%)	8	( 9%)	31	( 7%)
Anorexia	n (%)		( 2%)		( 1%)	6	(7%)	12	(3%)
Constipation	n (%)	3	( 3%)	4	( 1%)	5	(6%)	12	( 3%)
Metabolic / Nutrition									
Peripheral Edema	n (%)	6	( 5%)	4	( 1%)	1	( 1%)	11	(2%)
Musculoskeletal									
Myalgia	n (%)	78	(7%)	21	( 8%)	5	(6%)	34	(7%)
Arthritis	n (%)	4	(4%)	16	(6%)	0			(4%)
Arthralgia	n (%)	3	(3%)	11	(4%)	5	(6%)		(4%)
Nervous	• •		•		` '		` '		, ,,
Nervousness	n (%)	8	( 7%)	28	(10%)	16	(18%)	52	(11%)
Depression	n (%)	10	(9%)		(10%)		(11%)		(10%)
Cataplexy	n (%)	8	(7%)		(11%)		(8%)		(9%)
Anxiety	n (%)	2	(2%)		(6%)		(17%)		(7%)
Somnolence	n (%)		(9%)		(6%)		(6%)		(7%)
Dizziness	n (%)		(5%)		(6%)		(7%)		(6%)
Insomnia	n (%)	2			(5%)	9	(10%)	26	(5%)
Respiratory	(70)	_	· ~ /0/	.5	\ \ \ \ /0/	3	(10/0)	20	( 3/0)
Rhinitis	n (%)	15	(13%)	50	(18%)	٥	(10%)	74	(16%)
Sinusitis	n (%)		(5%)				(10%)		(16%)
Cough		7			(13%)		(11%)		(11%)
•	n (%)				(12%)		(7%)		(9%)
Pharyngitis	n (%)	9	,		(8%)	9	(10%)		( 8%)
Bronchitis	n (%)	4	( 4%)	25	( 9%)	7	( 8%)	36	( 8%)
Urogenital	- 4643	-				_			. ==
Urinary Tract Infection	n (%)	4	( 4%)		( 5%)		(5%)		(5%)
Dysmenorrhea	n (%)	3	( 3%)	9	( 3%)	5	(6%)	17	(4%)

a: ≥5% of the safety evaluable population in any dosage group.

Source: Table 3.1.0; Appendix 1.0, Listing 3.0.0.

Table 7. Summary of Common<sup>a</sup> Drug-Related<sup>b</sup> Open-Label Emergent Adverse Experiences (C1538a/301/NA/US and C1538a/302/NA/US)

			Average Daily D	ose	
·	Statistic	Modafinil 400 mg (n = 112)	Modafinil 300 mg (n = 277)	Modafinil 200 mg (n = 89)	Modafinil Combined (n = 478)
Number of Patients with at Least One Open-Label Emergent Related Adverse Experience	n (%)	9 (8%)	53 (19%)	40 (45%)	102 (21%)
Body as a Whole					
Headache	n (%)	0	8 (3%)	5 (6%)	13 (3%)
Infection	n (%)	Ö	0 (3/6)	0	0
Pain	n (%)	Ŏ	Ö	0	0
Flu Syndrome	n (%)	Ö	0	0	
Accidental Injury		0	0		0
Back Pain	n (%)			0	0
	n (%)	0	0	0	0
Allergic Reaction	n (%)	0	0	0	0
Chest Pain	n (%)	0	0	0	0
Abdominal Pain	n (%)	0	0	0	0
Fever	n (%)	0	0	0	0
Neck Pain	n (%)	0	0	1 (1%)	1 (<1%)
Cardiovascular		_			
Hypertension	n (%)	0 .	1 (<1%)	0	1 (<1%)
Palpitations	n (%)	0	2 (<1%)	4 (4%)	6 ( 1%)
Digestive					
Dyspepsia	n (%)	0	1 (<1%)	1 (1%)	2 (<1%)
Tooth Disorder	n (%)	0	0	0 ` ´	o ` ´
Nausea	n (%)	1 (<1%)	5 (2%)	3 (3%)	9 (2%)
Diarrhea	n (̂%)	0 ` ′	2 (<1%)	0	2 (<1%)
Dry Mouth	n (%)	1 (<1%)	7 (3%)	3 (3%)	11 (2%)
Anorexia	n (%)	1 (<1%)	2 (<1%)	2 (2%)	5 (1%)
Constipation	n (%)	0	0	1 (1%)	1 (<1%)
Metabolic / Nutrition	11 (70)	J	U	1 (170)	1 (~170)
Peripheral Edema	n (%)	0	1 (<1%)	0	1 (<1%)
Musculoskeletal	11 (70)	_	1 (~170)	U	1 (~176)
Myalgia	n (%)	<i>t</i> .	0	0	
Arthritis		ŏ	0	0	0
	n (%)	0		0	0
Arthralgia	n (%)	U	0	0	0
Nervous	- 4045		40 4 554		
Nervousness	n (%)	3 (3%)	13 ( 5%)	13 (15%)	29 (6%)
Depression	n (%)	0	1 (<1%)	1 (1%)	2 (<1%)
Cataplexy	п (%)	1 (<1%)	1 (<1%)	2 (2%)	4 ( 1%)
Anxiety	n (%)	1 (<1%)	7 (3%)	10 (11%)	18 ( 4%)
Somnolence	n (%)	2 (2%)	6 (2%)	3 (3%)	11 (2%)
Dizziness	n (%)	0	1 (<1%)	1 ( 1%)	2 (<1%)
Insomnia	n (%)	1 (<1%)	2 (<1%)	5 (6%)	8 (2%)
Respiratory		• •	• •	, ,	, -,
Rhinitis	n (%)	0	0	0	0
Sinusitis	n (%)	Ô	Ō	Ö	Ŏ
Cough	n (%)	Ō	Ö	ñ	Ö
Pharyngitis	n (%)	ŏ	1 (<1%)	0 ,	ŏ
Bronchitis	n (%)	Ö	0	0	Ö
Jrogenital	11 (70)	v	U	U	U
Urinary Tract Infection	n /9/ \	0	^	•	0
	n (%)	0	0	0	0
Dysmenorrhea a: ≥5% of the safety evaluable population	n (%)	0	0	0	0

a: ≥5% of the safety evaluable population for all adverse experiences in any dosage group.

Cephalon, Inc. June 18, 1998

b: Includes probably related and related events. Source: Table 3.1.2; Appendix 1.0, Listing 3.0.0.

Table 11. Summary of Open-Label GGT Mean Observed and Change From Baseline Values By Visit (C1538a/301/NA/US and C1538a/302/NA/US)

			Average Da	aily Dose	
Parameter	- Statistic	Modafinil 400 mg	Modafinil 300 mg	Modafinil 200 mg	Modafinil Combined
GGT (IU/L)					
Observed Value	s at Open-label B	aseline			
ŧ	n	110	271	86	467
	Mean ± S.D.	33.2 ± 37.5	32.0 ± 26.9	27.1 ± 25.2	31.3 ± 29.4
Change from Op	oen-label Baseline	e Values			
Week 2	n	107	265	79	451
	Mean ± S.D.	0.1 ± 15.3	$-0.02 \pm 9.1$	-0.3 ± 10.3	-0.03 ± 11.0
Week 8	n	104	248	67	419
	Mean ± S.D.	$7.7 \pm 22.4$	$6.7 \pm 21.9$	$3.0 \pm 10.3$	6.3 ±20.7
Week 24	n	77	234	51	362
	Mean ± S.D.	10.4 ± 28.1	$8.0 \pm 25.6$	3.4 ± 11.0	$7.8 \pm 24.7$
Week 40	n	53	235	53	341
	Mean ± S.D.	$10.9 \pm 23.1$	5.6 ± 21.4	$6.3 \pm 20.5$	$6.6 \pm 21.6$
Week 88	n	12	124	21	157
	Mean ± S.D.	16.4 ± 37.6	11.2 ± 18.3	3.5 ± 11.2	10.6 ± 19.8
OL Endpoint	n	110	269	82	461
•	Mean ± S.D.	$8.6 \pm 28.1$	5.5 ± 19.0	$3.0 \pm 20.2$	$5.8 \pm 21.8$

Source: Tables 4.0.0 and 4.0.1; Appendix 1.1

## Shifts (C1538a/301/NA/US and C1538a/302/NA/US)

There were no clinically meaningful trends in the number of patients with shifts to values above the upper limit of normal (ULN) for total bilirubin, or shifts to below the lower limit of normal (LLN) for total protein and albumin.

Patients with shifts from baseline to above the ULN in alkaline phosphatase ranged from less than 1% at Week 2 to 7% at Week 88. A summary of patients with shifts to above the ULN in alkaline phosphatase is presented in the table below. Alkaline phosphatase values for individual patients are listed in Appendix 1.1.

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PROVIGIL® (modafinil) Tablets: Safety Update

Table 22. Modafinil UK and Ireland Named Patient Use - Patients Who Discontinued Due to Adverse Experiences or Had a Serious Adverse Experience

Subject	Sex	Age at Start	Modafinil Dose	Adverse experience (AE)	Discontinued Due to AE	Serious	Date of Last Dose	Duration of Treatment	Relationship to Study Drug
181233	Σ	63	not available	Vertigo	Yes	S S	04/18/97	3 days	Probable
. 091030	u	99	200 mg	Pressure in head, difficulty breathing, irritable, cataplexy worsened, lack of energy	Yes	o N	05/10/97	9 days	Probable
170944	Σ	52	300 mg	Nausea, agitation, emotional changes	Yes	o N	06/26/97	41 days	Probable
220834	LL	62	400 mg	Ankle and facial edema	Yes	8	76/20/80	109 days	Possible
230245	Σ	52	400mg	Myalgia	Yes	8	09/16/97	83 days	Probable
. 240630	ட	29	200mg	Depression, worsening cataplexy, tiredness	Yes	0	11/24/97	33 days	Probable
. 011166	ıL	31	400mg	Nightmares, poor concentration, low mood	Yes	٥ ٧	12/12/97	41 days	Probable
A110359	Σ	38	400mg	Itchy skin rash arms and legs	Yes	8 8	12/12/97	15 days	Possible
D51139	LL.	22	200mg	Worsening cataplexy	Yes	Yes	20/02/97	1 day	Possible
. D10832	L.	64	400mg	Increased cataplexy leading to falls	Yes	Yes	02/05/97	36 days	Probable

a: For SAEs, treatment duration is at time of SAE occurrence

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#### 6.2 Studies Conducted in Canada

Five studies and one compassionate use program were ongoing or were initiated in Canada since the cut-off date for data inclusion in the modafinil NDA 20-717. Available information regarding deaths, serious adverse experiences and discontinuations due to adverse experiences are summarized below.

## 6.2.1 Study 94003

Draxis Study 94003 was a double-blind, placebo-controlled crossover study in patients with narcolepsy, conducted from January 25, 1995 to January 19, 1996. A long-term, open-label portion of the study was conducted from March 11, 1995 to May 25, 1996.

No deaths or serious adverse experiences were reported during the conduct of this study. Three patients discontinued due to adverse experiences during Part 1 (short-term), one of whom was taking placebo at the time. One patient discontinued due to adverse experiences during Part 2 (long-term). These discontinuations are summarized in the following table.

Table 23. Discontinuations Due to Adverse Experiences in Draxis Study 94003

Patient Identifier	Age	Sex	Modafinil Dosage	Adverse Experience	Onset (Study Day)	Severity	Relationship to Study Drug	Drug Stop Day
01-01	49	М	400 mg	Nausea	2	Moderate	Probably	NR
				Headache		Moderate	Probably	
				Anxiety		Moderate	Probably	
				Repetitive () movements		Severe	Probably	
05-05	30	M	200 mg	Rash	29	Moderate	Unknown	34
05-11	20	М	Placebo	Chest pain	7	Severe	Probably	11
02-13	41	F	Maximum	Headaches	50	Severe	Probably	57
			500 mg	Melancholia	39	Moderate	Unknown	
			J	Lethargy	39	Moderate	Unknown	

NR = Not reported

Narratives and case report forms for these patients are found in Appendices 11.1 and 11.2.

#### 6.2.2 Special Access Program

There were no deaths or serious adverse experiences reported during the Canadian compassionate use program. There were nine discontinuations due to adverse experiences or pregnancy, as summarized in the following table.

Table 24. Discontinuations Due to Adverse Experiences in Draxis Compassionate Use Program

Subject	Sex	Birth Year	Modafinil Dose	Adverse Experience
•	F	1955	200 mg bid	pregnancy
	M	1941	100-200 mg bid	dyspepsia
	F	1974	200 mg bid	visual disturbance
	F	1947	200 mg, 100 mg bid	depression (seasonal)
	F	1940	200 mg bid	dyspepsia increased liver function test values
	F	1942	unknown	palpitations possible depression
	F	1956	300 mg qAM	epistaxis
	<b>M</b>	1949	100 mg "die"	palpitations dysphoria insomnia
	М	1925	200 mg bid	disrupted sleep increased leg movements

Case report forms were not consistently utilized in the Draxis compassionate use program. Therefore, case report forms and patient narratives for this study are not provided.

## 6.2.3 Military Studies in Canada

There were no deaths or serious adverse experiences reported in the four Canadian military studies: L40, L58, L136, and L188. One subject discontinued due to an adverse experience ("flu-like symptoms") from Study L58, but had not been treated with modafinil.

## 6.3 Studies Conducted by Lafon

Information regarding discontinuations due to AEs and SAEs from Lafon is provided through January 31, 1998.

# 6.3.1 <u>Discontinuations due to Adverse Experiences Since NDA Filing (Studies)</u>

Twenty-two (22) patients discontinued due to adverse experiences in a series of six studies conducted by These patients are summarized in the table below; case report forms (French and English translations) and narratives for these patients are found in Appendices 11.3 and 11.4.

Cephalon, Inc. June 18, 1998

Table 25. Summary of Adverse Experiences Leading to Discontinuation:

Sponsored Studies

Patient Identifier	Age	Sex	Modafinil Dosage	Adverse Experience	Onset (Study Day)	Severity	Relationship to Study Drug	Drug Stop Day
Stu	dy E10	27						
	65	М	200 mg QD	Dyspnea <sup>a, b</sup>	20	Mild	None	
	33	F	200 mg QD	Suicide <sup>a,c</sup>	549	Unknown		73
Stu	dy E10	28			J-15	ONKHOWN	None	549
31,	19	М	NR	Acute delirious outburst	NR	NR	NR	NR
45.	46	· F	NR	Increased falls Increased hypnagogic hallucinations	NR	NR	NR	NR
77.	61	М	NR	Increased facial twitches	NR	NR	NR	NR
84/	56	F	NR	Hospitalization for asthma	NR	NR	NR	NR
Stud	ly E10	29						
03	49	F	Placebo	Abdominal pain/ gastralgia	1	Medium	Probable	6
				Nausea	1	Mild	Probable	
04	47	F	200 mg BID	Nausea	2	Intense	Probable	3
				Vomiting	2	Intense	Probable	3
				Asthenia	2	Intense	Possible	
				Anorexia	2	Intense	Possible	
				Hot Flashes	2	Medium	Possible	
021	40	F	200 mg BID		5	Mild	<del>-</del>	
				Tremors	5	Medium	None	15
			200 mg QD <sup>d</sup>	Depression*	15		None	
				Anxiety	15 15	NR	None	
026	61	F	200 mg BID	Nausea		NR	None	
	•	•	200 mg bib		1	Medium	Probable	3
				Ocular pain	1	Medium	Probable	
046	64	F	Placebo	Insomnia	1	Medium	Probable	
049	61	F		Diarrhea ::	5	Medium	Probable	9
0-19	01	r	200 mg BID	Anxiety	4	Intense	Probable	10
050	46	_	200 DID	Insomnia	4	Intense	Probable	
030	40	F	200 mg BID	Anxiety	8	Medium	Probable	13
				Myalgia	9	Mild	Probable	
				Thoracic tightness	9	Medium	Probable	
<b>.</b>				Aggressiveness	9	Medium	Probable	
Study	y E104		ouble-Blind P				-	
01	75	F	NR	Increased stiffness	20	Average	NR	50
				Anxiety	30	Unobtrusive		<b>-</b>
				Sleep problems	30	Unobtrusive		
07	70	F		Nausea	5	Average	Possible	13
				Flatulence	5	Average	Possible	13
				Abdominal pain	5	Average	Possible	
				Headache	5	Average	Possible	
05	78	F		Increased fatigue	2			4-
				Increased blood	13	Average	NR	17
				pressure	13	NR	NR	
				Palpitations	13	NR	NR	

Table 25. Summary of Adverse Experiences Leading to Discontinuation:

Sponsored Studies (continued)

	Age			Adverse Experience*	Onset (Study Day)	Severity	Relationship to Study Drug	Drug Stop Day
Stud				Phase (cont)				
07	75	M	NR	Insomnia	1	Unobtrusive	Possible	19
				Tingling in lower extremities	4	Average	Possible	,,,
08	77	F	NR	Hypertonia	4	Average	Possible	8
				Respiratory obstruction	4	Average	Possible	Ü
				Tachycardia	4	Average	Possible	
	t i			Instability on walking			. 500,510	
				Flatulence	4	Average	Possible	
	y E10	43/0	pen-Label Pl	nase			. 000.0.0	
/G02°	60	M	400 mg QD	Angina pectoris	4	NR	None	35
Study	/ E10	44						55
11	9		NR	Insomnia	17	Discrete	Probable	34
Study	/ E10	47						54
8	NR	NR	NR .	Worsening problem with attention and concentration	NR	Intense	Likely	NR
13	NR	NR	NR	Headache	1 .	Unobtrusive	NR	21
				Asthenia		Average	Likely	۲۱

a: This adverse experience also was coded as a Serious Adverse Experience

c: This adverse experience resulted in death.

d: Patient took 200 mg BID until onset of SAE symptoms. Dose was then reduced to 200 mg QD.

NR=Not reported.

Source: MedWatch Reports and Case Report Forms

6.3.2	Serious Adverse Experiences Since NDA Filing	Studies)
Nine I	patients had serious adverse experiences in a series of fo	our studies conducted
by .	and one study conducted by	These experiences
are su	ummarized in the table below.	•

b. This adverse experience was also separately reported to the Agence du Médicament as a spontaneous event outside of a clinical trial.

e: Adverse experience information for this patient available as telephone contacts and is not included in double-blind CRF appearing in Appendix 11.4.

Table 26. Summary of Serious Adverse Experiences:

Sponsored Studies

Patient	<b>A</b>	•		Adverse	Onset (Treatment		Relationship
Identifier	Age	Sex	Modafinil Dosage	Experience	Day)	Severity	
Lafon Stu	•						
	33	F	200 mg QD	Suicide	549	Unknown	None
	47	М	400 mg QD	Fall	~1108	Mild	None
				Infection	1213	Mild	None
				Dizziness/loss of consciousness	1230	Mild	None
	46	F	500 mg QD	Asthenia	512	Moderate	None
	65	М	200 mg QD	Dyspnea	20	NR	None
	60	F	300 mg QD	Malaise	25	Severe	Possible
	ţ			Vertigo	25	Severe	Possible
	ŧ			Unconsciousness	25	Severe	Possible
				Disorientation	25	Severe	Possible
. Stu	dy E1		4				
84.	56	F	NR	Hospitalization for asthma	NR	NR	NR
Stud	dy E1	029					
021 <sup>b</sup>	40	F	200 mg BiD	Palpitations	5	Mild	None
			-	Tremors	5	Medium	110110
			200 mg QD°	Depression	15	NR	
			-	Anxiety	15	NR	
	ly E1	043		•			
. G02	60	М	400 mg QD	Angina Pectoris	4	NR	None
St	udy N	MOD0	2				
31-14	52	М	300 mg QD	Supraventricular tachycardia	1	Mild	Possible

a:This adverse experience was also separately reported to the Agence du Médicament as a spontaneous event outside of a clinical trial.

Source: MedWatch Reports and Case Report Forms

# 6.3.3 <u>Serious Adverse Experiences and Discontinuations Due to Adverse Experiences Not Previously Reported in NDA 20-717 Studies</u>

The five subjects appearing in the table below are identified by Lafon as having potentially serious adverse experiences for whom documentation in NDA 20-717 was limited to ISS Summary Table as event counts and individual

Study Reports. In the ISS, these subjects were not identified as having a serious adverse experience. Because these potentially serious adverse experiences were not described within NDA 20-717, additional clinical information is now listed.

identifies these patients as discontinuations due to adverse experiences. Based on Cephalon review, hospitalization of these patients suggests SAE.

c: Patient took 200 mg BID until onset of SAE symptoms. Dose was then reduced to 200 mg QD. NR=Not reported.

Table 27. Summary of Serious Adverse Experiences With Limited Presentation in NDA 20-717: Sponsored Studies

Patient Identifier	Age	Sex	Modafinii Dosage	Adverse Experience	Onset	Consorit	Relationship to
Stu	dy Or	en 4	4 Inpatient	Experience	(Treatment Day)	Severity	Study Drug
1	30		800 QD max	Aggression, motor instability,	8	Moderate	NR
				Mannerisms, logorrhea, auditory hallucinations	15	Severe	NR
Stud	dy 90:	B Inp	atient				
E02 (1)		r,	300 mg QD	Myoclonic movements	47	Moderate	Doubtful
	dy 82						
U19 _	31	F	100 mg bid	Psychomotor disorders,	2	Moderate	Definite
				Sleeping problems	7	Moderate	Possible
20	24	F	100 mg bid	Delirium, automatisms, excitation	4	Moderate	Possible
Lafon Stud	ly - O	pen l	Pharmacokinetics				
101	86		300 mg QD	Equilibrium disorder.	1	NR	NR
				LOC,	1	NR	NR
				Hypertension (203/75 mmHG),	1	NR	NR
				Restlessness,	1	NR	NR
				Insomnia,	4	NR	NR
				Choreiform movements		NR	NR

NR=Not reported.

Source: Case report forms

The 12 subjects in the table below are identified as having potentially serious adverse experiences for whom no safety data was included in NDA 20-717 because no CRFs were available.

tabular information summaries and adverse experience information were available and have been reviewed for this submission. Subject #103 from Study 691/1-2 was the only subject in this group known to have discontinued from study due to an adverse experience. A narrative based on tabular information for this subject appears in Appendix 11.3, although the case report form is not provided.

Prior reporting of these adverse events has appeared in either the IND submission (#42,873 Serial #000 6/30/93) or the current (April 10, 1995) Investigator's Drug Brochure (Serial #044 4/26/95).

Table 28. Summary of Serious Adverse Experiences Not Previously Reported in NDA 20-717: Sponsored Studies

	t Ass	C		Adverse	Onset		Relationship t
C	tudy 72	Sex	Modafinil Dosage	Experience	(Treatment Day)	Severity	Study Drug
3 301	62			•			
JQ 1	02	M	400 mg QD max	Generalized epileptic attack	26	Severe	NR
303	79	М	400 mg QD max	Malaise,	47		
	• •	•••	Too mg QD max	•	17	Severe	NR
S	tudy 70	2/8_1	1	Epileptic attack	27	NR	NR
01		R	600 mg (1 dose)	Ometaleuri	_	_	
••		althy	ood mg (1 dose)	Oneiric visual	1	Severe	NR
	•	ng")		impressions,			
	you	''9 <i>'</i>		nervous irritation,			
02	N	R	600 mg (1 dose)	Insomnia	_	_	
-		althy	ood mg (1 dose)	Oneiric visual	1	Severe	NR
				impressions,			
	you	ng")		Insomnia			
			_				
	tudy O						
JI	24	M	200 mg (1 dose)	Excitation,	1	Severe	NR
				mydriasis,			
				headache, visual			
				hallucinations			
	30	М	200 mg (1 dose)	Insomnia,	1	Severe	NR
			400 mg (1 dose)	mydriasis, clonic		0010.0	1414
			- ,	movements,			
				visual			
				disturbance,			
				tremor			
St	udy 69	8/6-2		o o i i o i			
	89		600 mg (1 dose)	Agitation,	1	Causas	0
				movement		Severe	Possible
				disorder.			
				•			
St	udy 79	7/6-3		insomnia			
4	70	F	100 mg bid	Dualinasia	_	_	
•	,,	•	roo mg bla	Dyskinesia,	2	Severe	NR
				delirious/agitated,			
24	udy 707	714 . 44	1	sleep problems			
<b>-</b> 31	22			Managara at a -	4	_	
•	~~	IVI	600 mg (1 dose)	Hypertension	1	Severe	NR
				(systolic BP=240			
				mmHg),			
				tachycardia			
<b>-</b>							
Stu	udy 691		200 mg bid	Attention deficit/	2	NR	NR
Stu	udy 691 70	М	Loo ing bid				
Stı 3*		М	200 mg big	hyperactivity,			
Stı 3*		М		hyperactivity, aggressive			
<b></b>	70		Loo ing bid				
3*	70 Jidy <b>79</b> 8	/5-9	•	aggressive			
3 <b>*</b>	70 Jidy <b>79</b> 8	/5-9	100 mg bid	aggressive	2	Mild	Definite
3 <b>*</b>	70 Jidy <b>79</b> 8	/5-9	•	aggressive delirium  Extrapyramidal	2	Mild ,	Definite
3*	70 Jidy <b>79</b> 8	/5-9	•	aggressive delirium Extrapyramidal syndrome,	2	Mild .	Definite
3*	70 Jidy <b>79</b> 8	/5-9	•	aggressive delirium  Extrapyramidal	2	Mild ,	Definite

\*This patient was discontinued from study. The CRF for this patient was lost in flood salvage operations and is not included. A narrative based on existing tabular summaries from the salvage operations and is not included. It is found in Appendix 11.3.

NR=Not reported.

Source: tabular information summaries

Table 29. Summary of Serious Adverse Experiences:
Foreign Spontaneous Reports Outside Clinical Trial

Patient Identifier	Age	Sex	Modafinil Dosage	Adverse Experience	Onset (Treatment Day)	Severity	Relationship to Study Drug <sup>a</sup>
	18	М	Up to 700 mg QD <sup>b</sup>	Delirium with agitation and cries	89	Severe	Causality not attributed
	<b>56</b>	М	300 mg QD	Malaise with vision abnormalities	c	Moderate	Doubtful
	85 🕴	М	200 mg QD	Hemipligia	d	Severe	Doubtful
	NR ¹	M	200-300 mg QD	Gastritis hemorrhagic	NR	NR	Doubtful
	32	NR	200 mg QD	Anaphylactic shock, Angiodema (Quinkcke's edema), Urticaria	1	Life- threatening	NR

- a: Relationship per Lafon
- b: Patient was prescribed modafinil 400 mg QD, but took up to 700 mg QD with the goal of improving physical performance.
- c: Exact therapy dates unknown. Patient had received modafinil for approximately 1 year at the time of the event.
- d: Exact therapy dates unknown. Patient had received modafinil for approximately 3 years at the time of the event.
- e: No patient initials provided. Cephalon SAE Report Number CEPH-1538-98-0015b

NR=Not reported.

Source: MedWatch and Lafon Pharmacovigilance Reports

An additional two patients had serious adverse experiences reported as a spontaneous event outside of a clinical trial to the *Agence du Médicament*. However, these patients were actually involved in Lafon clinical trials, resulting in duplicate reporting of their SAEs. Therefore, the SAEs for these latter patients are summarized in the Lafon clinical trial Sections 6.3.1 and 6.3.2.

#### 7. LITERATURE REVIEW

Published information about potential uses of modafinil or clinical studies of modafinil was identified via a survey of the world literature. Computer searches by trained information retrieval specialists

included searches of the Medline, BIOSIS, Embase, Pharmaceutical News Index, and other databases (see Appendix 12.0). Key words utilized in the searches were "Cephalon", "modafinil", and "narcolepsy". Pharmaceutical industry and scientific general interest publications also were monitored for information relative to modafinil. The searches were conducted without restriction to language. The searches, current as of December 22, 1997, resulted in the identification of more than 200 articles, letters, reviews, and press releases.